

PART B - FEE(S) TRANSMITTAL

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Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450or Fax (571)-273-2885

B/S

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23628

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08/16/2007

WOLF GREENFIELD & SACKS, P.C.
600 ATLANTIC AVENUE
BOSTON, MA 02210-2206

11/19/2007 TNGUYEN3 00000035 10761169

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Sylvana Householder

(Depositor's name)

Sylvana Householder

(Signature)

November 14, 2007

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/761,169	01/20/2004	Ali O. Gure	L0461.70073US01	3734

TITLE OF INVENTION: SMALL CELL LUNG CANCER ASSOCIATED ANTIGENS AND USES THEREFOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/16/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
REDDIG, PETER J	1642	435-006000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Wolf, Greenfield &
Sacks, P.C.

2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Ludwig Institute for Cancer Research

New York, NY

Memorial Sloan-Kettering Cancer Center

New York, NY

New York Hospital-Cornell Medical Center, New York, NY

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies _____

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

☒ A check is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge ~~any deficiency~~, any deficiency, or credit any overpayment, to Deposit Account Number 232825 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

John R. Van Amsterdam

Date November 14, 2007

Typed or printed name

John R. Van Amsterdam

Registration No. 40,212

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

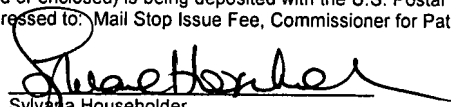
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Docket No.: L0461.70073US01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Ali Gure et al.
Serial No.: 10/761,169
Confirmation No.: 3734
Filed: January 20, 2004
For: SMALL CELL LUNG CANCER ASSOCIATED ANTIGENS AND
USES THEREFOR
Examiner: P. J. Reddig
Art Unit: 1642

Certificate of Mailing Under 37 CFR 1.8(a)	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Dated: <u>November 14, 2007</u>	 Sylvia Householder

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith are the following documents:

☒ [X] Part B — Issue Fee Transmittal

☒ [X] Return Receipt Postcard

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at (617) 646-8000, Boston, Massachusetts.

A check in the amount of \$720.00 is enclosed to cover the issue fee and patent copies. If the fee is insufficient, the balance may be charged to Deposit Account 23/2825.

Dated: November 14, 2007

Respectfully submitted,

By: 

John R. Van Amsterdam

Registration No.: 40,212

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Boston, Massachusetts 02210-2206

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x11/16/07x